365 Fifth Avenue New York, NY 10016-4309 212.817.7490 212.817.1626 fax intstu@qc.cuny.edu www.gc.cuny.edu



## Request for Extension of Program for J-1 Status Students

- Use this form to request an extension of your program of study (extension of Form DS-2019).
- This is a fillable PDF; please complete the appropriate section, digitally sign, and return the completed form to the Office of International Students.
- Please create a digital signature to sign your section of this form.
- A request for an Extension of Program must be submitted prior to the Program End Date on the Form DS-2019.
- The J-1 student must submit proof of financial resources in addition to this form.

The 5-1 student must submit proof of financial i	esources in addition to this form.
Section 1: To Be Completed By Student	
Student ID Number:	SEVIS Number:
Surname:	Given Name:
Academic Program:	Degree Level: Master's □ Doctoral Level I □ II □ III □
Current Program End Date:	Requested Program End Date:
Please explain why, for academic reasons, you have been unable to complete your program of study by the end date on your Form DS-2019:	
Signature:	Date:
Section 2: To Be Completed By Academic Advisor or Executive Officer	
Please explain, in terms of academic milestones, what has the student completed, what still needs to be completed, how long will this take:	
The J-1 status student above is in good standing with the program and is eligible to register for the next semester. I request the Office of International Students to extend the student's program of study to the expected Program End Date:	
Signature:	Date:
Title:	Academic Program: